# STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

NEW HAMPSHIRE

| I. Name of Lobbyist(s) James Demers, Robert Blaisdell, Tom Prasol |                              |   |   |  | O   | OF STATE      |  |
|---|------------------------------|---|---|--|---|---------------|--|
| II. Name of lobbyist's partnership, firm or corporation, if any:  |                              |   |   |  |   |               |  |
| Demer   | s, Blaisc                    | lell & Prasol, I  | nc                                      |  |   |               |  |
|   | (Name o                      | of partnership, firm  | or corporation)                         |  | ****  |               |  |
| 72 North  | Main St.                     | Suite 301   | Concord                                 | NH   | 03301   |               |  |
| Business Addre  | ss: (Street                  | )   | (Town/City)                             | (State)  | (Zip Code)                                      |               |  |
| ` /   | 8.1498                       | (   | )                                       |  | s.demers@demers-l                               | blaisdell.com |  |
|   | ephone)                      | rs: (Choose one -   | (Fax                                    | rts for each client, OR you                              | u may file a sanarata ran                       | aut fau       |  |
| reportable ex   | pense tran                   | sactions which a  | re not attributable                     | to any one client).                                      | u may me a separate repo                        | UFL IOF       |  |
| ☐ All reporta   | able transac                 | tions occurring in  | the months prior to                     | the reporting date relative                              | to the following client:                        |               |  |
| -   |                              |   | •                                       | 1 0  |   |               |  |
|   | (1                           | Full Name of Client   | as it appears on the L                  | obbyist Registration Form)                               |   |               |  |
| <u>OR</u>   |                              |   |   |  |   |               |  |
| ☐ All reporta   | ble transact<br>1y particula | ions by the lobby<br>r client.                              | st (including the lol                   | bbyist's family), or the lobb                            | ying firm listed below wh                       | ich are       |  |
| IV. Date of R Reports cover:                                      |                              | April 26, 2017   ivity from date of registration to 3/31/17 |   | July 26, 2017  |   |               |  |
| Keporis cover:  |                              | October 25, 2017  |   | activity from 4/1/17 to 6/3 January 31, 2018             |   |               |  |
|   |                              | ivity from 7/1/17 to  |   | activity from 10/1/17 to 1                               |   |               |  |
| V. There has<br>If this box is concord, NH                        | hecked, con                  | o fees received a<br>applete just this for                  | and no reportable m and submit it to to | e transactions made sin<br>he Secretary of State's Offic | ce the last report.   ce, State House, Room 204 | ι,            |  |
| VI. Check if a  | ndditional 1                 | reports are attacl  | ned:                                    |  |   |               |  |
| If you hav  | e received                   | fees or made expe   | nditures, you must                      | file <b>Addendum A</b> – Fees an                         | d Expenses                                      |               |  |
| ☐ If you hav Expense Reim   |                              | onorarium or rein   | bursed expenses, ye                     | ou must file Addendum B-                                 | - Report of Honorariums o                       | r             |  |
| If you, you   | ur firm, or y                | our family has m  | ade political contrib                   | outions, you must file Adde                              | ndum C– Political Contri                        | butions       |  |
| I have read RS  | SA 15, RSA                   | nation by Lobbyi<br>15-B, RSA 14-C<br>of my knowledge       | and RSA 664 and h                       | nereby swear or affirm that                              | the foregoing information                       | is true       |  |
|   | m                            | Even  |   | 10/13/   | (Date)  |               |  |
| (Signature of   | lobbyist)<br>er M            | Dener   | 1                                       |  | (Date)  |               |  |
| (Print Name of  |                              |   |   |  |   |               |  |

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# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

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(RSA Chapter 15:6)

OCT 2 4 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s) James Demers, Robert Blaisdell, Tom F   | Prasol DEPARTMENT OF ST  |
|--|--|
| II. Name of lobbyist's partnership, firm or corporation, if any:   |  |
| Demers, Blaisdell & Prasol, Inc  |  |
| (Name of partnership, firm or corporation)   |  |
| III. Name of Client EVERYTOWN For Gun SAFETY ACTION Fund   | Date 10/13/17  |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:   | relations, or public relations services<br>ss fee amount reported shall not be   |
| a) Total of all fees received in this reporting period   | a)\$ 13,480.00   |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)   | a)\$ 13,400.00<br>b)\$ 42,900.00   |
| c) Total of all fees received to date (Add lines a and b)  | c)\$ 56,300,00   |
| d) Indicate the amount of any such fees that are due, but have not yet been paid   | d) \$  |
| V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | lient and if expenditures are made by<br>hay be filed for the lobbyist(s)/firm<br>aggregate total of all expenses paid<br>penses; (b) the aggregate total of all<br>e: meals purchased during a business<br>is than \$10 that is given to the person<br>d with a value of \$25.00 or less); and<br>rting period of greater than \$25.00 for<br>e of greater than \$25, purchase of a<br>r than \$25, but not greater than \$50<br>expense reimbursement, or politica |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.  | a) \$  |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.  | b) \$  |
| c) Total of all itemized expenditures reported in detail in section VI.  | c) \$  |

| d) Total expenses for this reporting period (Add lines a, b and c)   | d) \$                              |
|--|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$                              |
| f) Total of all expenses year to date  | f) \$                              |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.   | obbying fees during this reporting |
| Paid to:   | Amount:                            |
|  | \$                                 |
|  | \$                                 |
|  | \$                                 |
|  | \$                                 |
|  | \$                                 |
|  | \$                                 |
| Sworn Statement/Affirmation by Lobbyist  | · <del></del>                      |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm  | n that the foregoing information   |
| is true and complete to the best of my knowledge and belief.   |                                    |
| J.M. Dener   | 10/13/17                           |
| (Signature of lobbyist)  | (Date)                             |
| James M. Demers  |                                    |
| (Print Name of lobbyist)   |                                    |